



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
\$130.00

Complete if Known

Application Number	10/634,199
Filing Date	August 5, 2003
First Named Inventor	Robert E. Johnson
Examiner Name	TBA
Art Unit	TBA
Attorney Docket No.	3618/1/US

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number **19-1025**

Deposit Account Name **Pharmacia of Pfizer Inc**

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	<input type="text"/>
1002	340	2002	170	Design filing fee	<input type="text"/>
1003	530	2003	265	Plant filing fee	<input type="text"/>
1004	770	2004	385	Reissue filing fee	<input type="text"/>
1005	160	2005	80	Provisional filing fee	<input type="text"/>
SUBTOTAL (1)		(\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	0 X <input type="text"/>	= 0.00
Independent Claims	- 3** =	0 X <input type="text"/>	= 0.00
Multiple Dependent		<input type="text"/>	= <input type="text"/>

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	<input type="text"/>
1201	86	2201	43	Independent claims in excess of 3	<input type="text"/>
1203	290	2203	145	Multiple dependent claim, if not paid	<input type="text"/>
1204	86	2204	43	** Reissue independent claims over original patent	<input type="text"/>
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	<input type="text"/>
SUBTOTAL (2)		(\$)		\$0.00	

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	<input type="text"/> 130.00
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
1053	130	1053	130	Non - English specification	<input type="text"/>
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	<input type="text"/>
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
1251	110	2251	55	Extension for reply within first month	<input type="text"/>
1252	420	2252	210	Extension for reply within second month	<input type="text"/>
1253	950	2253	475	Extension for reply within third month	<input type="text"/>
1254	1,480	2254	740	Extension for reply within fourth month	<input type="text"/>
1255	2,010	2255	1,005	Extension for reply within fifth month	<input type="text"/>
1401	330	2401	165	Notice of Appeal	<input type="text"/>
1402	330	2402	165	Filing a brief in support of an appeal	<input type="text"/>
1403	290	2403	145	Request for oral hearing	<input type="text"/>
1451	1,510	1451	1,510	Petition to institute a public use proceeding	<input type="text"/>
1452	110	2452	55	Petition to revive - unavoidable	<input type="text"/>
1453	1,330	2453	665	Petition to revive - unintentional	<input type="text"/>
1501	1,330	2501	665	Utility issue fee (or reissue)	<input type="text"/>
1502	480	2502	240	Design issue fee	<input type="text"/>
1503	640	2503	320	Plant issue fee	<input type="text"/>
1460	130	1460	130	Petitions to the Commissioner	<input type="text"/>
1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)	<input type="text"/>
1806	180	1806	180	Submission of Information Disclosure Statement	<input type="text"/>
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
1801	770	2801	385	Request for Continued Examination (RCE)	<input type="text"/>
1802	900	1802	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify)					<input type="text"/>

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)
\$130.00

SUBMITTED BY

Complete if Known

Name (Print/Type)	James M. Warner	Registration No. (Attorney/Agent)	45,199	Telephone	(314) 274-3642
Signature	<i>James M. Warner</i>			Date	July 29, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



3618/1/US

JOINT DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As the below named inventors, we hereby declare that:

Our residences, post office addresses and citizenships are as stated below next to our names;

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled FORMULATIONS OF MODIFIED ANTIBODIES AND METHODS OF MAKING THE SAME, the specification of which

- is attached hereto.
- was filed on August 5, 2003 as Application Serial No. 10/634,199.

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We hereby acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

Prior Foreign Application(s)

We hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Country	Application No.	Date of Filing (day month year)	Date of Issue (day month year)	Priority Claimed Under 35 U.S.C. §119

Prior United States Provisional Application(s)

We hereby claim priority benefits under Title 35, United States Code, §119(e)(1) of any U.S. provisional application listed below:

U.S. Provisional Application No.	Date of Filing (day month year)	Priority Claimed Under 35 U.S.C. §119(e)(1)
60/406,w 412	8-28-02	Yes

Prior United States Application(s)

We hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Date of Filing (Day, Month, Year)	Status — Patented, Pending, Abandoned

Power of Attorney

And we hereby appoint, both jointly and severally, as our attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith the following customer number, attorneys and agents, their registration numbers being listed after their names:

Customer No. 26,648

BAUER, S. Christopher	42,307
FEDDE, Kenton	54,701
FITZSIMMONS, Patricia	52,894

KEANE, J. Timothy	27,808
LAPPIN, Julie M.	46,612
POLSTER, Rachel A.	47,004
POLSTER, Philip B., II	43,864
SCHUH, Joseph R.	48,180

SLAVINSKY, Christopher	54,456
WARNER, James M.	45,199
WILLIAMS, Scott A.	39,876

All correspondence and telephone communications should be addressed to:

Pharmacia Corporation
Corporate Patent Department
P.O. Box 1027
Chesterfield, MO 63006

Tel: (314) 274-3642
Fax: (314) 274-7256

Customer No. 26648

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of First Inventor Johnson Robert E.
Family Name First Given Name Second Given Name
Residence _____

Post Office Address 15593 Bedford Forge Dr., Unit 23, Chesterfield, MO 63017

Signature Robert Johnson Date 22 July 2004

Full Name of Second Inventor Lewis Lavinia M.
Family Name First Given Name Second Given Name

Residence _____
1833 WESTMEADE DRIVE, CESTERFIELD, MO 63017

Post Office Address 8532 Skokie Boulevard, Apt. #D2, Skokie, IL 60077

Signature Lewis Date 22nd July '04

Full Name of Third Inventor Qi Hong _____
Family Name First Given Name Second Given Name

Residence _____

Post Office Address 7459 Healis Place, San Diego, CA 92129

Signature _____ Date _____



3618/1/US

JOINT DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As the below named inventors, we hereby declare that:

Our residences, post office addresses and citizenships are as stated below next to our names;

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled FORMULATIONS OF MODIFIED ANTIBODIES AND METHODS OF MAKING THE SAME, the specification of which

- is attached hereto.
- was filed on August 5, 2003 as Application Serial No. 10/634,199.

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We hereby acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

Prior Foreign Application(s)

We hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Country	Application No.	Date of Filing (day month year)	Date of Issue (day month year)	Priority Claimed Under 35 U.S.C. §119

Prior United States Provisional Application(s)

We hereby claim priority benefits under Title 35, United States Code, §119(e)(1) of any U.S. provisional application listed below:

U.S. Provisional Application No.	Date of Filing (day month year)	Priority Claimed Under 35 U.S.C. §119(e)(1)
60/406,w 412	8-28-02	Yes

Prior United States Application(s)

We hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Date of Filing (Day, Month, Year)	Status - Patented, Pending, Abandoned

Power of Attorney

And we hereby appoint, both jointly and severally, as our attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith the following customer number, attorneys and agents, their registration numbers being listed after their names:

Customer No. 26,648

CUSTODIAN FEE: \$3,000	KEANE, J. Timothy	27,808	WARNER, James M.	45,199
BAUER, S. Christopher	LAPPIN, Julie M.	46,612	WILLIAMS, Scott A.	39,876
FEDDE, Kenton	POLSTER, Rachel A.	47,004		
FITZSIMMONS, Patricia	POLSTER, Philip B., II	43,864		
	SCHUH, Joseph R.	48,180		

All correspondence and telephone communications should be addressed to:

Pharmacia Corporation
Corporate Patent Department
P.O. Box 1027
Chesterfield, MO 63006

Tel: (314) 274-3642
Fax: (314) 274-7256

Customer No. 26648

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of First Inventor Johnson Family Name Robert First Given Name E. Second Given Name
Residence _____

Post Office Address 5593 Bedford Forge Dr., Unit 23, Chesterfield, MO 63017

Signature _____ Date _____

Full Name of Second Inventor Lewis Family Name Lavinia First Given Name M. Second Given Name
Residence _____

Post Office Address 8532 Skokie Boulevard, Apt. # D2, Skokie, IL 60077

Signature _____ Date _____

Full Name of Third Inventor Qi Family Name Hong First Given Name Second Given Name
Residence _____

Post Office Address 7459 Healis Place, San Diego, CA 92129

Signature Hong Qi Date July 16, 2004